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## REPLY

We appreciate the comments provided by Drs. Rundek and Spence and recognize their important contribution to this area, documented by the cited references. We would, however, like to stress that our data (1) were obtained in an asymptomatic population without known cardiovascular disease, not only stroke-free as in the Northern Manhattan Study (2), and neither “vascular patients” with premature atherosclerosis or cerebrovascular disease as those studied by Dr. Spence (3). As previously reported (4), we agree that ultrasonographic characteristics other than plaque size or plaque burden may provide additional prognostic information, such as plaque echolucency, heterogeneity, and surface irregularity and ulceration. We also agree that the Tromsø study is important and did refer to it.

The High Risk Plaque BioImage study is the first large population-based study with a cross-sectional evaluation of subclinical arterial disease in 4 different arteries at the same baseline

examination (5), including quantitative assessment of carotid plaque burden as described in our paper. We look forward to presenting clinical outcomes and their predictability by baseline findings in the near future.

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